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ABSTRACT

The problem of high rates of unwanted and unplanned adolescent pregnancy continues unchecked in the United States, with severe negative consequences for the young mothers, their children, and society. Prevention programs for teenage pregnancy have been less than effective. This study investigated the relationship between feminist values and teenage pregnancy prevention. High school women (N=409) identified as being at high risk for unwanted pregnancy were surveyed to determine their motivations, values, and aspirations. Strong support for feminist values was found, as was a relatively optimistic and hopeful group of young women. Analysis of variance showed a strong relationship between the holding of feminist values and positive (hopeful) scores on Beck's Hopelessness Scale. Based on these findings, two major thrusts in prevention program content are suggested which include the use of feminist content as a tool for building better self-concept in high-risk women and the teaching of assertive, self-interested, self-awareness aspects of feminist thinking. Seven feminist oriented programing areas in teenage pregnancy prevention are: (1) successful women role models; (2) paid work and volunteerism; (3) leadership experience; (4) self-awareness training; (5) problem solving skills training; (6) assertiveness training; and (7) values clarification. (Author/ABL)

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TEEN PREGNANCY PREVENTION AND FEMINIST VALUES

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Running Head: Teen Pregnancy Prevention and Feminist Values

ABSTRACT

The problem of high rates of unwanted and unplanned adolescent pregnancy continues unchecked in the United States, with severe negative consequences for the young mothers, the children born, and society. This paper reports findings from a survey of the motivations, values and aspirations of 409 high school women identified as being at high risk for unwanted pregnancy. Strong support for feminist values was found, as was a relatively optimistic and hopeful group of young women. Analysis of variance showed a strong relationship between the holding of feminist values and positive (hopeful) scores on Beck's Hopelessness Scale. Based on these findings, the possible desirability of including feminist content in pregnancy prevention programs is discussed, and specific content areas are defined.

Teen Pregnancy Prevention and Feminist Values

Background

The problem of high rates of unwanted and unplanned adolescent pregnancy continues unchecked in the United States, actually increasing according to some estimates (Teen Pregnancy, 1981). The negative consequences of this phenomenon have a broad impact on our society, and are seen in a high proportion of the families with which social workers are involved. Early pregnancy and childbirth often mean that the future aspirations of the young mother are cut short, and both mother and child run a high risk of long term poverty with its attendant negative impact on health and wellbeing (Bolton, 1980). Studies show a heightened risk of becoming a victim of child abuse or neglect for the child born to an unmarried adolescent mother (Bolton, 1980). The costs to society of this problem are also great, in the lost productivity of the mother, in the economic dependency of the family, and in the cost of providing social and human services to this high risk group.

While adolescent development, and teen sexuality in particular have been the topic of a great deal of literature, research and public debate, attempts to mount effective preventive programs aimed at unplanned and unwanted teen pregnancy have to date been less than effective. The majority of efforts have been cognitive and educational in their orientation, focused on information about sexuality, birth control and family

life. There has been little attempt to base interventions on the value structure of particular groups of teen women.

Adolescence is known as a time of identity crisis, in which the teen is in a state of "becoming" (Lidz, 1976; Erikson, 1968). Developmental literature assumes that adult values will eventually be internalized by a process of introjection. Values during the teen years vacillate between parental and peer group influences, and at times are at great disparity with actions taken or with predicted life events (Bassoff & Ortiz, 1984). Statistics such as unintended pregnancy rates provide evidence that teen women often do not act in their own best interests, or even in accordance with their own stated values (Gordon, Note 1). Risk taking behavior, as described by Luker (1975), may explain some of this behavior.

The motivations, values and aspirations of teen women have been the focus of a multi-year research project by the author and her colleague, Betty Z. Bassoff. The issues of optimism, future planning and self worth as they impact on future life goals, and on the ability of young women to attain these goals were of interest to the researchers. The concept of learned helplessness was seen as a possible explanation for the failure of some teen women to act in their own best interests (Bassoff & Ortiz, 1984).

The major work on the theory of learned helplessness has been done by Seligman (1975). This work postulates that under certain conditions of inability to exert control over repeated

aversive events in one's life a form of social learning, which Seligman calls learned helplessness takes place. This learning, which is a passive non response to one's environment develops as a result of a perceived lack of control over one's environment. As a learned behavior, it can be reinforced, or extinguished by additional life experiences. In other words if it is a learned behavior, it can also be unlearned. Feelings of depression and hopelessness are viewed as indicators of learned helplessness.

While a severely deprived and unresponsive environment seems a likely explanation for the development of learned helplessness as a response in some young women from traditionally oppressed and impoverished groups (Bassoff, 1978), a traditional socialization into women's role might also serve to explain this behavior in other less deprived groups. Mental health literature continually reports women as more depressed and hopeless than men, as more passive, and has having less sense of power over their own lives (Chester, 1972; Radloff, 1980; Weissman, 1980). Interpretations of the meaning of this data have been various (Weissman & Klerman, 1981; Moulton, 1977), but the passivity and helplessness of some teen women, in not acting to attain their desired life choices, could be explained by their internalization of what they perceive to be womanly behavior. Some recent research on women and mental health shows an association between feminist values and positive mental health status, such as higher self esteem (Cartwright, Lloyd, Nelson & Bass, 1983; Borges &

Laning, 1980), and more sense of power over one's life. The feminist emphasis on the inherent value of women, on their equality with men and on their right to be assertive is credited with this effect.

The field of adolescent pregnancy prevention is struggling for a conceptualization for its preventive thrust. This paper shares new findings which we believe are of interest and utility in this search. Our data suggest a relationship between the holding of feminist values by high risk teen women, and the kind of positive mental state that may enable them to act in their best interests with regard to life choices. These findings have implications for pregnancy prevention program content and delivery and for social work practice with teen women.

The Study

Research Questions

As a part of a larger study, the researchers formulated two research questions exploring feminist values and depression/ hopelessness in teen women at high risk for unwanted teen pregnancy. They were:

1. To what extent do teen women support feminist values?
2. Is there a relationship between feminist values and depression/hopelessness in teen women?

Sample

A sample of 409 teen women was obtained from 4 urban southern California high schools, identified by the school

district as having students at high risk for early pregnancy. School district records showed high drop out rates, and high rates of teen pregnancy at these schools. Two of the four schools had special classes for teen mothers. The non-random sample consisted of volunteers obtained in classes, in club activities and in common areas of the school campus.

Instrument

The research instrument consisted of two parts, a self administered 43 item questionnaire utilizing both open and closed ended questions, and the Hopelessness scale, developed by Aaron Beck (Beck, Weissman, Lester & Trexler, 1974). Hopelessness has been identified as one of the core characteristics of depression, and is defined as a system of negative expectancies about one's self and one's future life (Beck et al, 1974). The Hopelessness Scale was designed to reflect these negative expectations about the future.[1]

Questions were asked about demographics, career and educational aspirations, life satisfaction, and attitudes towards feminism. The data was analyzed by computer, using SPSS, obtaining frequencies, percentages, crosstabulations, and analysis of variance.

Sample Demographics

The following paragraph presents the descriptive characteristics of the sample. Teen women aged thirteen to fifteen made up 63 (15.5%) of the sample, 113 (27.8%) were

sixteen, 133 (32.7%) were seventeen, 71 (17.4%) were eighteen, 27 (6.6%) were over eighteen or did not respond to the question. With regard to grade in school, 137 (33.5%) were sophomores, 147 (35.9%) were juniors, 93 (22.7%) were seniors, and 32 (7.9%) did not respond to the question. The ethnic background reported by the respondents was the following: 89 (21.8%) white, 121 (29.6%) black, 95 (23.2%) Chicano/Mexican American, 43 (10.5%) Asian, 47 (11.5%) other, and 14 (3.4%) no response.

Respondents' religion, and information on family composition were not obtained due to concerns of school officials, but in a similar survey of the same schools the previous years, 44.8% of the teen women lived with two biological parents, 9.3% with one natural and one step parent, and 45.9% in a household other than these, i.e. single parent family, with other relatives, or other.

Findings

Support for Feminist Values

Tables 1 and 2 show the responses to two questions designed to measure support for women's equality and feminist values.

Insert Table 1 about here

The teen women in this study strongly supported equal rights for women in this sample, as shown in Table 1. Over 72% agreed with the idea, and only 4.4% did not. A relatively large group, 15.6% were not sure how they felt on the issue. Feelings were

even stronger on the question of whether women should stand up for the rights that they do have, with over 92% stating that they should, and only 1.2% of teens feeling that they should not. The undecided group on this question was much smaller, only 3.7%, as shown in Table 2.

Insert Table 2 about here

Feminist Values and Hopelessness

A very strong relationship was obtained between feminist values and high scores on the Hopelessness Scale. This scale has possible scores of 0 to 20, with 20 being the highest, or most optimistic score. The mean score for this sample was 15.6, with a range of 4 to 18, and a modal score of 18. Although this sample of teens was considerably more than the psychiatric patients the instrument was tested on (Beck et al, 1974), they were more depressed than a recent sample of university women, who obtained a mean score of 17.7 (Boulet & Devine, 1984).

Table 3 shows a statistically significant ($p < .002$) association between high (optimistic) scores (15.7407) and support for the idea of equal rights for women. Lower (depressed) scores were found in the women who did not agree with the idea (14.1677), and those who were not sure (14.4727).

Insert Table 3 about here

There is also a strong postive correlation between high (optimistic) hopelessness scores ($p < .0250$), and the belief that women should stand up for their rights (15.7118) as shown in Table 4. The four women who believed that women should not stand up for their rights had very low (depressed) scores, and the fourteen who were not sure also scored low (13.4286).

Insert Table 4 about here

Implications

The connection between feminist values and positive mental state described above is, we feel an interesting one, and one which has not been made before. Much mental health literature supports this connection for women as a total group (although there have been contradicting results and interpretations), but little has been done to explore the relationship in teens. A recent study of UCLA, using similar methodology to the research being reported, found no connection between hopelessness scores and feminist values in graduate and undergraduate female students, who were less depressed and more feminist overall than the high school women in this study (Boulet & Devine, 1984). The predictable future life for the UCLA women is of course, far

brighter than it is for the high risk high school group; their optimism is justified, and their realistic ability to exert control over their future life events is greater. The situation of teen women may well be unique because of the special developmental tasks of adolescence, and the lesser amount of independence, experience, and maturity of teens compared to older women.

What these results mean for social work practice and for adolescent pregnancy prevention is that the relationship between feminist values and mental state in teens deserves further investigation, and that feminism may provide a new conceptual thrust for working with teen women using a values approach toward unwanted pregnancy prevention and maximizing life choices.

Two major thrust in prevention program content are suggested, based on these findings. The first is use of feminist content as a tool for building better self concept in high risk teen women. The focus on the inherent worth and value of women and on their strengths and abilities may help to strengthen the ego of teens at a time of great confusion and conflict about what it means to be a woman and an adult. Feminism may be used to provide a way to integrate female role expectations with personal desires and aspirations.

The second use of feminism is to teach a way of taking control of one's own life. The assertive, self-interested, self aware aspects of feminist thinking may be useful as a way of

teaching young women how to narrow the gap between their personal values and aspirations and their anticipated life events.

If indeed learned helplessness is a phenomenon that contributes to the loss of future life choices and opportunities for these young women because of unplanned and unwanted early pregnancy, then feminist content in addition to traditional content in pregnancy prevention programs might have an antidotal effect. An increased understanding of life options, combined with confidence in the ability to control what happens in one's life, should help young women select and strive for more desirable life choices, as an alternative to early pregnancy.

Use of feminism in these programs is a sensitive matter which should be handled carefully, since some feminist values may be in conflict with the values of the teen's family or community. This is a problem endemic to educational efforts in general and can be particularly problematic in relation to sexuality and birth control education. The teaching of feminist content as well, may not have community support and sanction, and may be easily misunderstood.

Program Content

Feminist oriented program content in a teen pregnancy prevention program encompasses a number of different kinds of activities. Seven different programming areas are described below.

1. Role Modelling

Program personnel and guest speakers can be real life models of women who feel good about themselves, are self aware, and are able to control their destinies to meet their own aspirations. Successful women in various careers and lifestyles can offer examples of the options and choices open to today's teens. Particular care must be utilized to select role models from cultural, ethnic and socioeconomic backgrounds with which the teens can identify.

2. Work and Voluntarism

Both through paid part time work and through volunteering, teens can build self-esteem, skills and independence. At the same time they gain additional insight into future career choices, and to their own occupational preferences. Pregnancy prevention programs can teach job hunting skills, coordinate job opportunities, and create volunteer opportunities for their clientele, with a focus on raising the aspiration level of the young women, and building confidence that high goals are achievable.

3. Leadership Experience

Through participatory governance of the program, special interest clubs, peer counseling and big sister type activities, teens can gain leadership experience which will build confidence and self esteem.

4. Self Awareness Training

Good self concept and confidence in ability to control what happens in life can only develop in the young woman who knows and understands herself, her feelings and her aspirations. With so many conflicting signals from parents, community and peers about what a young woman should be, do, and want, self awareness training would help the teen to be clear about what SHE wants for herself, and thus to be more able to act in her self interest.

5. Problem Solving Skills Training

This kind of training can increase the teen's repertoire of skills for handling the challenges of her daily life more effectively, building confidence and self esteem.

6. Assertiveness Training

Assertiveness training, which focuses on developing skills of communicating clearly and effectively about ones views and preferences, and not being afraid to "say no" has clear utility for the teen woman. A strengthened ability to reject undesired activities with peers, including unwanted sex, will be helpful to the young woman in meeting her goals.

7. Values Clarification

Teen women today are beset by a bewildering array of conflicting social values, about womens roles, sexuality, feminity and childbearing, as well as many other areas. Family, society, religion and peers may all be making conflicting demands on the young woman. This can be expecially true for teens from

minority subcultures, or recently immigrated groups. Values clarification exercises, conducted in a non-judgemental environment, can help the young woman achieve a coherent view of her own personal values, combined with the skills training outlined above, may help the young woman to act in her own best interests, and avoid unwanted consequences, such as early unplanned pregnancy.

Reference Notes

1. Sol Gordon, "Teenage Sexuality", address given at a Family Planning Symposium, Madison, WI, May 6, 1976.
2. Tami Boulet and Deborah Devine, Feminism and Hopefulness in College Women (Unpublished Masters Thesis, School of Social Welfare, UCLA, 1984).

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Footnotes

1. This article presents a scale designed to quantify hopelessness. It consists of 20 true and false questions, nine of which are keyed false and 11 of which are keyed true. In tests with psychiatric patients, the scale has been found to be valid, reliable, and sensitive to the respondent's level of depression.

Table 1

Question: What do you think about equal rights for women?

N = 409

	Freq	Percent
I agree with the idea	296	72.4
I don't agree with the idea	18	4.4
I don't know	64	15.6
Other (specify)	23	5.6
No Response	8	2.0
Total	409	100.0

Table 2

Question: Should women stand up for their rights?

N = 409

	Freq	Percent
Yes	379	92.7
No	5	1.2
I don't know	15	3.7
No Response	10	2.4
Total	409	100.0

Table 3

Question: What do you think about equal rights for women?

N = 368

	Mean	Std. Dev.	N
Agree	15.7407	3.6805	270
Don't Agree	14.1667	4.9020	18
Don't Know	14.4727	3.7211	55
Other	17.6190	2.6358	21
No Response	18.5000	1.7321	4
Total	15.6114	3.7567	368

F = 4.2444
P < .0023
ETA SQRD = .0447

Table 4

Question: Should women stand up for their rights?

N = 368

	Mean	Std. Dev.	N
Yes	15.7118	3.6970	347
No	12.5000	6.4031	4
I don't know	13.4286	3.7970	14
No Response	18.3333	2.0817	3
Total	15.6114	3.7567	368

F = 3.1523
P < .0250
ETA SQRD = .0253